



INTERNATIONAL
TRADE
ADMINISTRATION

Performance Management Tracking System

Program Area: _____

Name of Rating Official: _____ Phone: _____

Name of Approving Official: _____ Phone: _____

Performance Cycle: FY _____	Performance Plan	Progress Review	Summary Rating	Score	Level Assigned	Award (If Applicable)	Award Appropriation Code (optional for business unit use only)
Employee	Date signed	Date signed	Date signed				
Name:							
Comments:							
Name:							
Comments:							
Name:							
Comments:							
Name:							
Comments:							
Name:							
Comments:							
Name:							

http://www.ita.doc.gov/hrm/documents/performance_management_tracking_system.pdf

Performance Cycle: FY _____	Performance Plan	Progress Review	Summary Rating	Score	Level Assigned	Award (If Applicable)	Award Appropriation Code (optional for business unit use only)
Employee	Date signed	Date signed	Date signed				
Comments:							
Name:							
Comments:							
Name:							
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